



08-03-05

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JAMES F. BAIRD
ATTORNEY AT LAW
33 East Main Street-On the Common
P O Box 574
West Brookfield, Massachusetts 01585-0574

EXPRESS MAIL
ED693835315US

(508) 867-2441
(888) 867-2441

FAX:(508) 867-2441

July 30, 2005

Box Patent Application
Commissioner of Patents and Trademarks
Washington, DC 20231

Re: BIDET
Atty. Doc. No.: UTL 00-025, Serial No.: 10/694/514

Gentlemen:


Enclosed please find Response to Office Correspondence mailed June 30, 2005 for the above referenced invention. Including amended Claims 1,2 and 3. Also included are Substitute Description of The Preferred Embodiment and Substitute Brief Description of the Drawings.

I have previously paid the fee of \$225.00 being the fee for extension during the second month.

Also enclosed please find a self addressed postcard. Please indicate the date the Response is received on the card and return same to the undersigned.

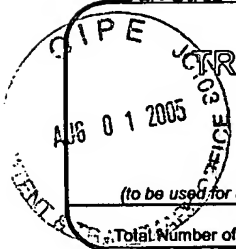
If you have any questions, please call.

Very truly yours,


James F. Baird, Esq.
Reg. No. 31,463

JFB/

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

44

Application Number	10/694,514
Filing Date	10/27/2003
First Named Inventor	Pacheco, Manuel M
Art Unit	3751
Examiner Name	Fetsuga, Robert M.
Attorney Docket Number	UTL 00-025

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<i>Response to Correspondence</i>
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	<i>6/30/05</i>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	JAMES F. BAIRD, Attorney At Law		
Signature	<i>[Signature]</i>		
Printed name	James F. Baird		
Date	August 1, 2005	Reg. No.	31,463

CERTIFICATE OF TRANSMISSION/MAILING

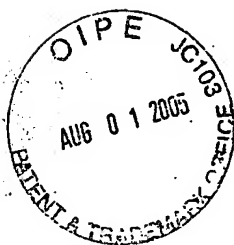
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as ~~per label~~ *Express Mail* in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	<i>[Signature]</i>		
Typed or printed name	James F. Baird	Date	Aug 1, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Express Mail
ED 693835315 US

**PATENT**

Atty. Doc. No.: UTL00-025

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Manuel A. Pacheco

Serial No.: 10694,514

Group No.: 3751

Filed: 10/27/2003

Examiner: Fetsuga, Robert M.

For: BIDET

Commissioner of Patents and Trademarks

Washington, D.C. 20231

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is

- ☒ a small entity — verified statement:
☐ attached.
☒ already filed.
☐ other than a small entity.

CERTIFICATION UNDER 37 CFR 1.10

I hereby certify that this : amendment transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service on this date August 1, 2005 in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number ED 525323938 US addressed to the: Commissioner of Patents and Trademarks, Washington, D.C. 20231.

JAMES F. BAIRD

(Type or print name of person mailing paper)



(Signature of person mailing paper)

NOTE: Each paper or fee referred to as enclosed herein has the number of the "Express Mail" mailing label placed thereon prior to mailing. 37 CFR 1.10(b).

EXTENSION OF TERM

NOTE: "Extension of Time in Patent Cases (Supplement Amendments) — If a timely and complete response has been filed after a Non-Final Office Action, an extension of time is not required to permit filing and/or entry of an additional amendment after expiration of the shortened statutory period.

If a timely response has been filed after a Final Office Action, an extension of time is required to permit filing and/or entry of a Notice of Appeal or filing and/or entry of an additional amendment after expiration of the shortened statutory period unless the timely-filed response placed the application in condition for allowance. Of course, if a Notice of Appeal has been filed within the shortened statutory period, the period has ceased to run." Notice of December 10, 1985 (1061 O.G. 34-35).

NOTE: See 37 CFR 1.645 for extensions of time in interference proceedings and 37 CFR 1.550(c) for extensions of time in reexamination proceedings.

3. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply

(complete (a) or (b) as applicable)
previously

(a) ☒ Applicant petitions for an extension of time for the total number of months checked below:

Extension (months)	Fee for other than small entity	Fee for small entity
<input type="checkbox"/> one month	.00	.00
<input checked="" type="checkbox"/> two months	225.00	.00
<input type="checkbox"/> three months	.00	.00
<input type="checkbox"/> four months	.00	.00
		Fee \$ _____

If an additional extension of time is required please consider this a petition therefor.

(check and complete the next item, if applicable)

☒ An extension for 2 months has already been secured and the fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$ _____

OR

(b) ☐ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims has been calculated as shown below:

(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY		
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO PREVIOUSLY PAID FOR		PRESENT EXTRA	RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE
TOTAL	*	MINUS	**	=	x6 =	\$		x12 =	\$
	3		3	0					0.00
INDEP.	*	MINUS	***	=	x17 =	\$		x34 =	\$
	3		3	0					0.00
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+55 =	\$		+110 =	\$
									n/a
					TOTAL	\$	OR	TOTAL	\$
					ADDIT. FEE	\$			0.00
* If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.									

- * If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.
 - ** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".
 - *** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- The "Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

(complete (c) or (d) as applicable)

(c) ☒ No additional fee for claims is required

OR

(d) ☐ Total additional fee for claims required \$_____

FEE PAYMENT

5. ☐ Attached is a check in the sum of \$_____.
- ☐ Charge Account No. _____ the sum of \$_____.

A duplicate of this transmittal is attached.

FEE DEFICIENCY

NOTE: If there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the cases. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, 1065 O.G. 31-33.

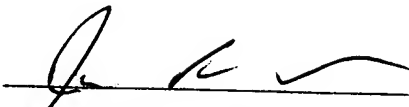
6. ☐ If any additional extension and/or fee is required charge Account No. _____.

AND/OR

☐ If any additional fee for claims is required, charge Account No. _____

Reg. No.: 31,463

Tel. No.: (508) 867-2441



SIGNATURE OF ATTORNEY

James F. Baird

Type or print name of attorney

P.O. Box 574

P.O. Address

West Brookfield, MA 01585-0574